

UNDERSTANDING DRY EYE DISEASE

What is dry eye disease?

Dry eye disease can happen when a person does not produce enough tears or their tears are of poor quality to keep the eyes nourished and lubricated. Tears are needed to keep the front surface of the eyes healthy and help provide clear vision.¹

Risk factors associated with dry eye disease can include:



Aging¹



Female Gender¹

Pregnancy, menopause, and use of oral contraceptives



Medications or Medical Conditions¹

Such as antihistamines, diabetes, and thyroid issues



Lid Disorders^{1,2}

Such as meibomian gland dysfunction and blepharitis



Digital Screen Use¹

Failure to blink regularly

In dry eye disease, risk factors can contribute to ocular surface stress, which can lead to tear instability and composition changes, which may lead to inflammation.^{3,4}



Inflammation can be a key driver of dry eye disease. If left untreated, the cycle of inflammation can continue and may lead to or worsen dry eye disease.⁴



Assess and recognize some of the symptoms that suggest dry eye disease

During a workup, patients may present or describe the following symptoms which can be associated with dry eye disease:

- Blurry vision, during certain activities such as reading²
- Scratchy or gritty feeling, like something in the eye⁵
- Eyes are red or irritated⁵
- Feeling of watery eyes⁵
- Burning feeling in the eyes⁵

Recognize the risk factors and symptoms of dry eye disease to help identify patients for appropriate diagnosis.

Indication

Xiidra[®] (lifitegrast ophthalmic solution) 5% is indicated for the treatment of signs and symptoms of dry eye disease (DED).

Important Safety Information

- Xiidra is contraindicated in patients with known hypersensitivity to lifitegrast or to any of the other ingredients.

For additional safety information, see accompanying Full Prescribing Information in pocket.

YOU PLAY AN IMPORTANT ROLE IN IDENTIFYING PATIENTS WITH DRY EYE DISEASE

Patients may not know they have dry eye disease. Ask the right questions* during the patient workup to help identify it, such as:



How frequent and severe is your eye discomfort?

Symptom frequency and severity can give insight into the potential chronic nature of dry eye disease.²



How long have your symptoms lasted and was there a triggering event?

Dry eye disease can be chronic, and may generally worsen by the end of the day.⁶ Additional follow-up questions can help identify the trigger.



Are you taking artificial tears (ie, over-the-counter eye drops) to reduce symptoms?

If yes, ask additional questions, including how often and document the answer.⁷ If a patient is not responding to their current therapy, another option may be needed like Xiidra.



Is your vision affected and does it clear with blinking?

Prolonged staring can dry eyes and reduce vision quality. Vision generally recovers with blinking.⁶



Do you wear contact lenses?

Contact lenses can worsen dry eye disease.⁶

If you suspect a patient may have dry eye disease:
Are you comfortable alerting the doctor for further screening?



*Questions are interpretations from various guidelines and questionnaires that help identify patients with dry eye disease.

References: 1. American Optometric Association. Dry eye. Accessed May 13, 2020. <https://www.aoa.org/patients-and-public/eye-and-vision-problems/glossary-of-eye-and-vision-conditions/dry-eye> 2. Stapleton F, Alves M, Bunya VY, et al. TFOS DEWS II Epidemiology Report. *Ocul Surf.* 2017;15(3):334-365. 3. Pflugfelder SC, de Paiva CS. The pathophysiology of dry eye disease: what we know and future directions for research. *Ophthalmology.* 2017;124 (suppl 11):S4-S13. 4. Bron AJ, de Paiva CS, Chauhan SK, et al. TFOS DEWS II Pathophysiology Report. *Ocul Surf.* 2017;15(3):438-510. 5. Sullivan DA, Rocha EM, Aragona P, et al. TFOS DEWS II Sex, Gender, and Hormones Report. *Ocul Surf.* 2017;15(3):284-333. 6. Wolffsohn JS, Arita R, Chalmers R, et al. TFOS DEWS II Diagnostic Methodology Report. *Ocul Surf.* 2017;15(3):539-574. 7. Jones L, Downie LE, Korb D, et al. TFOS DEWS II Management and Therapy Report. *Ocul Surf.* 2017;15(3):575-628.

Important Safety Information (cont)

- In clinical trials, the most common adverse reactions reported in 5-25% of patients were instillation site irritation, dysgeusia and reduced visual acuity. Other adverse reactions reported in 1% to 5% of the patients were blurred vision, conjunctival hyperemia, eye irritation, headache, increased lacrimation, eye discharge, eye discomfort, eye pruritus and sinusitis.
- To avoid the potential for eye injury or contamination of the solution, patients should not touch the tip of the single-use container to their eye or to any surface.
- Contact lenses should be removed prior to the administration of Xiidra and may be reinserted 15 minutes following administration.
- Safety and efficacy in pediatric patients below the age of 17 years have not been established.

For additional safety information, see accompanying Full Prescribing Information in pocket.

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